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CHAPTER 115
AIR EMISSION LICENSE APPLICATION FORMS

State of Maine
Department of Environmental Protection
Bureau of Air Quality
17 State House Station
Augusta, Maine 04333-0017
phone: (207) 287-2437 fax: (207) 287-7641

Section A: FACILITY INFORMATION

Facility Name to Appear on License: _____

Physical Location: _____ City/Town: _____ County: _____

Facility Mailing Address: _____

City/Town: _____ Zip Code: _____

Facility Phone Number: _____

Facility / Application Description:

_____

_____

_____

_____

_____

Current License #: A- _____ - _____ - _____ - _____

Application #: A- _____ - _____ - _____ - _____ (to be filled in by the Department)

Check When Done:
__ Application Completed
__ Copy Sent to Town (date sent _____)
__ Public Notices Published
(paper name: _____ date: _____)
__ Enclosed Public Notice Tear Sheet
__ Signed Signatory Form (section J)
__ If applicable, notified abutting landowners (major modification)
__ If applicable, enclosed check for fee (new sources)

Facility Contact:

Name: _____ Title: _____
Company: _____
Mailing Address: _____
_____
City/Town: _____ Zip Code: _____
Phone: _____ Fax: _____
e-mail: _____

Application Contact:

Name: _____ Title: _____
Company: _____
Mailing Address: _____
_____
City/Town: _____ Zip Code: _____
Phone: _____ Fax: _____
e-mail: _____

Billing Contact:

Name: _____ Title: _____
Company: _____
Mailing Address: _____
_____
City/Town: _____ Zip Code: _____
Phone: _____ Fax: _____
e-mail: _____

Section B: FUEL BURNING EQUIPMENT

Emission Unit ID	Type of Equipment (boiler, furnace, engine, etc.)	Maximum Design Capacity	Maximum Firing Rate	Fuel Type (and % sulfur)	Date of Manufacture	Date of Installation	Stack #	Control Device
Boiler #1 (Example)	*package boiler*	*50 MMBtu/hr (Example)*	*333.3 gal/hr (Example)*	*#6 oil, 2% (Example)*	*1984 (Example)*	*1990 (Example)*	*1 (Ex.)*	*ESP (Ex.)*
Gen. #1 (Example)	*Emergency Generator*	*125 kW (Example)*	*8.9 gal/hr (Example)*	*diesel, 0.05% (Example)*	*1995 (Example)*	*1995 (Example)*	*2 (Ex.)*	*None (Ex.)*

Monitors for Fuel Burning Equipment:

If applicable, indicate types of required/operated monitors, including Continuous Emission Monitors (CEM), Continuous Opacity Monitors (COM), parameter monitors for operational purposes, etc.

Emission Unit	Type of Monitor	Data Measured
Boiler #1 (Example)	*CEM (Example)*	*NO_X (Example)*
Boiler #1 (Example)	*param. – operational (Example)*	*temperature (Example)*

Section C: INCINERATORS

	Incinerator Unit 1	Incinerator Unit 2
Incinerator Type (medical waste, municipal, etc.)		
Waste Type		
Make (Shenandoah, Crawford, etc.)		
Model Number		
Date of Manufacture		
Date of Installation		
Number of Chambers		
Max. Design Feed Rate (per load)	lb	lb
Max. Design Combustion Rate	lb/hr	lb/hr
Heat Recovery? (Yes or No)		
Retention Time	seconds	seconds
Automatic Feeder? (Yes or No)		
Temperature Range primary	to °F	to °F
secondary	to °F	to °F
Auxiliary Burner - Primary Chamber max. rating (MMBtu/hr)		
type of fuel used		
Auxiliary Burner - Secondary Chamber max. rating (MMBtu/hr)		
type of fuel used		
Annual Waste Combusted for _____(yr)		
Pollution Control Equipment (if any)		
Stack Number		
Monitors (ie - temperature recorder)		

Section D: PROCESS EQUIPMENT

Emission Unit ID	Type of Equipment	Maximum Raw Material Process Rate (name and rate)	Maximum Finished Material Process Rate (name and rate)	Date of Manufacture	Date of Installation	Stack #	Control Device
Kilns (Example)	*Drying Kilns (Example)*	*N/A (Example)*	*25 MMBF/year (Example)*	*1990 (Example)*	*1990 (Example)*	*N/A (Ex.)*	*none (Example)*
PB#1 (Example)	*Paint Booth (Example)*	*10 gal/hr (Example)*	*N/A (Example)*	*2001 (Example*	*2001 (Example)*	*#4 (Ex.)*	*Paper Filters (Example)*

Parts Washers/Solvent Degreasers

Emission Unit ID	Capacity (gallons)	Solvent Used
Degreaser #1 (Example)	*15 (Example)*	*Kerosene (Example)*

PROCESS EQUIPMENT (section D cont'd)

Chemical Usage

Note: Complete this section for any chemicals integral to your process, for example, a cementing process for outersoles, dyes, surface coating, printing, cleaning, etc. Attach additional pages or MSDS sheets as needed.

Process	Chemical compound used in process	Actual Compound Usage (gal or lb for yr ____)	Hazardous chemical(s) in compound	Percent VOC[1] (%)	Percent HAP[2] (%)	Total VOC emitted (lb/year)	Total HAP emitted (lb/year)

[1] Volatile Organic Compounds
[2]Hazardous Air Pollutants

Describe method of record keeping (ie. monthly calculations from purchase records, flow monitors on solvent tanks, etc.)

_____
_____
_____
_____
_____

Describe methods used to calculate VOC/HAP emitted (ie – test results, if control equipment was taken into account; if conditions exist where solvents remain in the substrate rather than complete volatilization, etc.)

_____
_____
_____
_____
_____

Section E: STACK DATA

Stack #	Height Above Ground (m or ft)	Inside Diameter (m or ft)	Exit Temperature °F	Exhaust Flow Rate (m^3/s or ft^3/s) [indicate actual or standard]

Section F: ANNUAL FACILITY FUEL USE

Total Fuel Consumption by Month for: _____ (year)

	fuel type: _____	fuel type: _____	fuel type: _____
	Avg % sulfur (oil) _____ Avg % moisture (wood) _____ (circle one: gal, tons, scf)	Avg % sulfur (oil) _____ Avg % moisture (wood) _____ (circle one: gal, tons, scf)	Avg % sulfur (oil) _____ Avg % moisture (wood) _____ (circle one: gal, tons, scf)
January	_____	_____	_____
February	_____	_____	_____
March	_____	_____	_____
April	_____	_____	_____
May	_____	_____	_____
June	_____	_____	_____
July	_____	_____	_____
August	_____	_____	_____
September	_____	_____	_____
October	_____	_____	_____
November	_____	_____	_____
December	_____	_____	_____
Total	_____	_____	_____
Proposed Annual Limit	_____	_____	_____

Section G: LIQUID ORGANIC MATERIAL STORAGE

Tank #						
Capacity (gallons)						
Materials Stored						
Reid Vapor Pressure						
Annual Throughput						
Above or Below Ground?						
Tank Type (floating or fixed, riveted or bolted, etc.)						
Physical Description – year installed						
Physical Description – color						
Dimensions - height (ft)						
Dimensions - Diameter (ft)						
Control Device						

Section H: MISCELLANEOUS

Note: Use this section to describe any equipment, activities, or other air emission sources that did not fit in any of the above categories. Include descriptions of the associated emissions. Attach additional pages if necessary.

Section I: BPT/BACT AND OTHER ATTACHEMENTS

BPT/BACT Analysis:

For license renewals for existing equipment, applicants are required to submit a Best Practical Treatment (BPT) analysis to the Department. A BPT analysis establishes what equipment or requirements are appropriate for control or reduction of emissions of regulated pollutants to the lowest possible level considering the existing state of technology, the effectiveness of available alternatives, and the economic feasibility.

For new licenses or the addition of new equipment to existing licenses, applicants are required to submit a Best Available Control Technology (BACT) analysis. A BACT analysis is a top-down approach to selecting air emission controls. It is done on a case-by-case basis and develops emission limits based on the maximum degree of reduction for each pollutant emitted taking into account economic, environmental and energy impacts.

☐ I certify that, to the best of my knowledge, the control equipment, fuel limitations, and process constraints outlined in this application represent BPT / BACT for the equipment and processes listed.

OR

☐ I have attached a separate BPT / BACT analysis to this application.

Other Attachements:

Please list any attachments included with this application.

Section J: SIGNATORY REQUIREMENT

Each application submitted to the Department must include the following certification signed by a Responsible Official*:

"I certify under penalty of law that, based on information and belief formed after reasonable inquiry, I believe the information included in the attached document is true, complete, and accurate."

_____	_____
Responsible Official Signature	Date
_____	_____
Responsible Official (Printed or Typed)	Title

* A Responsible Official is defined by MEDEP Chapter 100 as:

A. For a corporation: a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation, or a duly authorized representative of such person if the representative is responsible for the overall operation of one or more manufacturing, production, or operating facilities applying for or subject to a permit and either:

(1) The facilities employ more than 250 persons or have gross annual sales or expenditures exceeding $25 million (in second quarter 1980 dollars); or

(2) The delegation of authority to such representatives is approved in advance by the permitting authority;

B. For a partnership or sole proprietorship: a general partner or the proprietor, respectively;

C. For a municipality, State, Federal, or other public agency: Either a principal executive officer or ranking elected official. For the purposes of this part, a principal executive officer of a Federal agency includes the chief executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., a Regional Administrator of EPA).